

Field Treatment


1. Basic airway/spinal immobilization prn
 2. Oxygen/pulse oximetry
 3. Advanced airway prn
 4. If shock, treat by NONTRAUMATIC HYPOTENSION **M8** guideline or appropriate Trauma guideline
 5. Cardiac monitor/document rhythm and attach EKG strip
 6. Blood glucose test
 7. Venous access
 8. If hypoglycemia, **dextrose 50 %** 50ml slow IVP
 - ① ① ②
- ☞ May repeat one time

Note: ③


9. If hypoventilation or strong suspicion of narcotic overdose, **naloxone 0.8-2mg IV/IN/IM** titrated to adequate respiratory rate and tidal volume
 - ② ③

Drug Considerations

Dextrose:

-  ① Pediatrics: see **Color Code Drug Doses/ L.A. County Kids**

Naloxone: (Narcan®):

- ② Alternate dose: 2mg IN or IM
-  ③ Pediatrics: see **Color Code Drug Doses/ L.A. County Kids**.
 Alternate route IN or IM

Special Considerations

- ① Hypoglycemia:
 If blood glucose <80mg/dL (Chemstrip) or < 60mg/dL (glucometer, if known diabetic <80)
- ② Consider oral glucose agents for an awake, known diabetic with a gag reflex.
- ③ If unable to establish venous access and hypoglycemic, consider **glucagon 1mg IM**. May repeat every 20 minutes two times. Same for pediatrics.